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PETI	PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)								Docket Number (Optional)				
FY 2006 {Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).}								3053-	066				
Application Number 10/718,084							F	iled N	Iovembe	r 19	. 2003	_	
ForA	DOU	BLE-SIDED	OPTICAL	DISC	WITH	MEANS	FOR	INDI	CATING	TTS	DRODED	DIF	DECTION
Art U		2627							PSITOS,			_	RECTION
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.													
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):													
						<u>ee</u>		Small Er					
		One month (37	OFR 1.17(a)(1)))	\$12	20		\$6	0	\$_		_	
		Two months (37	CFR 1.17(a)(2	2))	\$48	50		\$22	.5	\$_		_	
	X	Three months (3	37 CFR 1.17(a))(3))	\$10	20		\$51	0	s_1	.020	_	
		Four months (37	CFR 1.17(a)(-	4))	\$15	90		\$79	5	s_		_	
		Five months (37	CFR 1.17(a)(5	5))	\$21	60		\$10	во	\$_		_	
_ A	pplicar	it claims small en	tity status. See	37 CFR	1.27.								
X A	A check in the amount of the fee is enclosed. EFT PAYMENT												
□ P	Payment by credit card. Form PTO-2038 is attached.												
_ т	The Director has already been authorized to charge fees in this application to a Deposit Account.												
X T													
W	WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2033.												
			o and datilo	inzacion o	11 10-203								
I am the applicant/inventor.													
	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).												
	x attorney or agent of record. Registration Number 29,876												
	attorney or agént under 37 CFR 1.34. Registifation number if acting under 37 CFR 1.34												
_			/// ~	-				0	P.02	. 2	500		
			Signature						D	ate			
-		Tiberi	u Weisz						(212)	684-	3900		
	Typed or printed name						_		Telephon	e Numb	er	- 1	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.													
Total of 1 forms are submitted. This collection of information is required by 37 CFR 1.13(s), The information is required to obtain or retain a benefit by the quiete which is to file (and by the													
his collec	tion of in	formation is required to	y 37 CFR 1.136(a). The inform	nation is req	ulred to obtain	n or retain	a benefit i	v the public w	ich is to	file (and butthe		

The underword or importance in required by 37 CPR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO of process) an application. Confidentially is governed by \$3.U.S.C. 122 and 37 CPR 1.11 and 1.14. This collection is estimated to face in minute to complete including garbiering, repering, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any continents on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Tastemath Office, U.S. Department of Commonce, P.O. Box 1460, Alexandria, V.A. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS 10 THIS ADDRESS. SEND TO: Commissions for Patients, P.O. Box 1440, Alexandria, V.A. 23313-1450.